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APPLICANTS

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**** CONTINUING DATA *********** FOREIGN APPLICATIONS *******

GERMANY 100 47 388.1 09/25/2000 JF

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 09/26/2001

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY GERMANY	SHEETS DRAWING 6	TOTAL CLAIMS 21	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: JF				

ADDRESS

22506

TITLE

At least partially implantable hearing system

FILING FEE RECEIVED 1432	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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